Where do you apply?

Application forms can be collected and returned at any of the following offices:

Programme Monitoring, Coordinating and Evaluation Unit #51-55 Frederick Street, Port of Spain (Jobco Building), Contact: 1(3 623-4663 Ext



MINISTRY OF HOUSING AND URBAN DEVELOPMENT PROGRAMME MONITORING COORDINATING AND EVALUATION UNIT (PMCEU) #51-55 Frederick Street, Port of Spain, Jobco Building

APPLICATION FORM

HOME IMPROVEMENT SUBSIDY (HIS) PROGRAMME

INTER-AMERICAN DEVELOPMENT BANK (IDB LOAN 5049/OC-TT)

1. APPLICANT'S INFORMATION:

Contact: 1(868) 623-4663 Ext. 2170	National ID/Driver's Permit/Passport#			
Ministry of Housing and Urban	Surname	First Name	Middle Name	
Development	Citizenship/Legal Resident	Country of Birth	Date of Birth (DD/MM/YYYY)	
44-46 South Quay, Port of Spain Tel: 623-4663 ext/ 2257. 2227. 2194.2170	Address: Mailing Address:			
The Housing Development	Telephone(s): Home	Work N	Mobile	
Corporation Sub-Office #2 McGilvary Street, Mon Repos,	Marital Status: Single	Married Divo	orced Separated	
San Fernando Tel: 612-7432 Ext. 8500	How did you find out about the p Word of mout Social Media		 Poster Newspapers 	
TOBAGO HOUSE OF	2. CO-APPLICANT'S INFORMATION:			
ASSEMBLY, SETTLEMENTS DIVISION	National ID/Driver's Permit/Pass	sport#	SEX: M F	
D Colosseum Building 2, Corner		how it is a		
Airport Bypass and Milford Road, Crown Point,	Surname	First Name	Middle Name	
Tobago Tel: 660-7473	Citizenship/Legal Resident	Country of Birth	Date of Birth (DD/MM/YYYY)	
ALL TTCONNECT KIOSKS ACROSS TRINIDAD AND TOBAGO	Address: Mailing Address:			
1	Telephone(s): Home	Work	Mobile	
			1 10 000	

Programme Contracting & Contracting &	APPLICATION FORM			
PMICEU				
FOR	HOME IMPROVEMENT SUBSIDY (HIS) PROGRAMME			
OFFICIAL USE ONLY	INTER-AMERICAN DEVELOPMENT BANK (IDB LOAN 5049/OC-TT)			
	3. HOUSEHOLD DATA			
	Is there any person with a disability resident in your household? Y N Gross Monthly Income? \$			
	Select from the following:			
	Salary	National Insurance Self Employed		
	Public Assistance Grant Disabili	ty Grant Other		
	Have you received any assistance under the Ministry's Home Improvement or Emergency Grant?			
	4. FINANCING:			
	How will you be financing your contribution	on to the repairs of your home?		
	Savings Loan Materials/Sweat Equity 5. LAND TENURE: Image: Constraint of the second s			
. /				
L	Is the land on which the house is built:			
11/2				
come la	Do you have permission to build from land owner(s)? Y N Do you own or are you part owner in any other property? Y N 6. HOME IMPROVEMENT WORKS: Type of work to be done: Earthen floors to concrete Roof and Ceiling Tiling for Kitchen Kitchen Cupboards Earthen floors to concrete			
£r*				
9	Electrical Works Tiling for Bathroom Upgrading for disabled Upgrading to ease overcrowding Plumbing and sanitary works			
	Upgrading from wooden structure to concrete structure			
	Estimated Cost of Repairs: \$			
	SUPPORTING DOCUMENTS Original and Copies of the following:	DECLARATION Once initially selected, an assessment interview will be conducted to determine the success of your application.		
	Applicant(s) Birth Certificate(s) ID Card(s) and Passports or DP(s)	Applicant's Name in Block		
	Evidence of citizenship (where necessary) Marriage, Death, Divorce Certificate(s)	Co Applicant's Name in Block		
	Recent Pay Slip/job letter/Affidavit attesting			
	to Income for Self Employed	I/we certify that the information given in this form is true and correct to the best of my/our knowledge and belief. If there is anything in the		
	Affidavit stating non ownership of additional property	information given above which is not true or which I/we do not believe to be true and correct, I/we am/are aware that the Ministry of Housing and		
	Title Deed / Deed of Lease or other Proof of Ownership	Urban Development is entitled to refuse my /our application.		
	Utility bill (WASA, T&TEC, etc)	Applicant's Signature		
	Builder's Estimate for Construction	Co Applicant's Signature		
		Date//		